



Public Health
Prevent. Promote. Protect.

Henderson County Environmental Health Department

Steven E. Smith, MPA, Health Director | Seth Swift, Environmental Health Supervisor

1200 Spartanburg Highway, Suite 100, Hendersonville, NC 28792

Lodging Plan Review Application/New Permit Application

OWNER

Name of Facility _____
Ownership Type: Association Corporation Individual Partnership Other Legal Entity _____

Physical Address of Facility _____ City _____ Zip _____

Mailing Address of Facility _____ City _____ State _____ Zip _____

APPLICANT

Applicant _____ Phone # _____

Applicant Mailing Address _____ City _____ State _____ Zip _____

Signature attesting to the accuracy of this application _____

PERSON IN CHARGE (leave blank if new construction)

Name _____ Title _____ Phone # _____

Address _____ City _____ State _____ Zip _____

FACILITY INFORMATION

Type of lodging establishment: Hotel/Motel* Bed and Breakfast Home (up to 8 rooms) Bed and Breakfast Inn (up to 12 rooms)
*Extended stay rooms located in the same building as daily rentals are subject to permitting and inspection.

Construction type: New Remodel (excluding cosmetic or non-structural changes) Change of Ownership

Scope of work: _____

of guest rooms _____ # of buildings _____

Sewage Disposal: Municipal Septic Tank

Water Supply: Municipal Well

Food operations (if applicable):

- prepares, or serves TCS (time/temp control for safety) foods to guest**
- prepares only food that is non TCS (time/temp control for safety) to guests (*opening and plating croissants or Danishes from bulk packaging; opening bulk can fruit; baking muffins*)
- does not prepare, but serves only non TCS (time/temp control for safety) prepackaged food (*continental breakfast i.e. individual packaged muffins, cartons of milk, individual cereal packets, whole fruit*)

Bed and Breakfast Only: # of meals a day _____

Types of meals: Breakfast Lunch Dinner

Menu(s) provided: YES NO

****If for a hotel or motel, then a separate Food Service Establishment Plan Review Application shall be submitted. All franchised/chain food service establishments shall be reviewed by NCDHHS.**

If this is a new facility being constructed:

SUBMIT THIS APPLICATION WITH PLANS TO GARRETT. CONTACT GARRETT AT (828) 694-6053 OR GRAPP@HENDERSONCOUNTYNC.GOV.

Visit: <http://ehs.ncpublichealth.com/rules.htm> to view all sanitation regulations.